

**ADDITIONAL T.R.S.L.L. REGISTRATION INFORMATION**

PLAYERS NAME: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail: \_\_\_\_\_

DOES PLAYER HAVE BROTHER/SISTER IN **THIS** LEAGUE? YES NO

IF YES, PLEASE PROVIDE NAME(s) AND AGE(s):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ONLY** if your child is playing T-Ball or Coach Pitch...do you have a request for a coach? YES NO

If so, who? \_\_\_\_\_

Any requests to play with another player? YES NO

\_\_\_\_\_

***Note: this is JUST a request and cannot be guaranteed***

What school does your child attend? \_\_\_\_\_

Players Shirt Size: YS YM YL YXL AS AM AL

Would you like to make a donation to TRSLL which would go to paying for lights only? If so, specify when you pay your registration at the end.